

## **NEUROPSYCHOLOGICAL EVALUATION AND CONSULTATION**

### **SERVICE DESCRIPTION:**

Neuropsychological evaluation and consultation consists of the administration and interpretation of a standardized battery of neuropsychological tests to provide information about a client's cognitive strengths and weaknesses following a Traumatic Brain Injury (TBI). This service includes consultation with the client, family, or other significant key person designated by the client, and Adult Head Injury (AHI) Service Coordinator for information gathering and/or interpretation of results.

Evaluations must be adapted to the cultural, ethnic, linguistic and communication background of the client and family.

### **SERVICE GUIDELINES:**

Neuropsychological evaluation may be provided under the following circumstances subject to the availability of funds:

- A neuropsychological evaluation has not been previously completed, and information is needed by the planning team to assist in identifying a feasible long-term goal; and
- Significant changes in client's functional status have occurred and information from a previous neuropsychological evaluation is not representative of present functioning, and information is needed by the planning team to assist in identifying a feasible long-term goal.

Written assessment questions will be developed by the planning team and submitted at the time of referral for neuropsychological evaluation.

### **PROVIDER REQUIREMENTS:**

The Provider must:

- Have a Department of Health and Senior Services (DHSS) Provider Participation Agreement for the provision of Neuropsychological Evaluation and Consultation services;
- Be licensed as a Psychologist with the State of Missouri with a specialty in neuropsychological, and
- Have one year's experience in working directly with persons with TBI.

### **UNIT OF SERVICE:            ONE COMPLETE BATTERY OF TESTING\***

\*The following tests are approved as usual and customary:

- Wechsler Adult Intelligence Scale – III;
- Wechsler Memory Scale – 3;
- Woodcock Johnson Revised Tests of Achievement;

- Trail Making Test;
- Boston Naming Test;
- Category Test;
- Grip Strength;
- Finger Tapping; and
- Lafayette Grooved Pegboard.

The following abilities must be addressed in the evaluation report:

- Intelligence;
- Academic functions;
- Memory;
- Attention;
- Language;
- Visual-spatial skills;
- Executive functions;
- Motor skills;
- Sensory perception;
- Emotional-behavioral functioning; and
- Speed of information processing.

<b>REIMBURSEMENT FLAT FEE: \$625.00</b>
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### **SERVICE PRODUCT:**

Written detailed evaluation report that includes a thorough review of all assessment and treatment records to date. Evaluation report must address written referral questions and must indicate:

- Client's functional cognitive strengths/weaknesses;
- Level of effort for testing session;
- Preferred learning style; and
- Specific, individualized recommendations to facilitate accomplishment of long-term goals as indicated in the Special Health Care Needs (SHCN) Service Plan.

This service shall include a follow-up meeting for consultation with the client, family, or other significant key person designated by the client, and AHI Service Coordinator for interpretation of results.

**DOCUMENTATION REQUIREMENTS:**

Providers must retain for three years, from the date of service, fiscal and treatment records that coincide with and fully document services billed to DHSS, and must furnish or make the records available for inspection or audit by DHSS or its representative upon request. Failure to furnish, reveal, and retain adequate documentation for services billed to DHSS may result in recovery of the payments for those services not adequately documented and may result in sanctions to the Provider's participation in DHSS programs. This policy continues to apply in the event of the Provider's discontinuance as an actively participating DHSS Provider through change of ownership or any other circumstance.

**REFERRAL INDICATORS:**

A Neuropsychological Evaluation may be requested when:

- A Neuropsychological Evaluation has not been previously completed, and information is needed by the planning team to assist in identifying a feasible long-term goal; and
- Significant changes in client's functional status have occurred and information from a previous Neuropsychological Evaluation does not represent present functioning.

**DESIRED OUTCOMES:**

- Feasible long-term outcome goal is identified; and
- DHSS staff will provide direction to the planning team that facilitates long-term goal accomplishments.